

Proposed Exhibit L, Mass. Alcohol and Substance Abuse Center Incident Report by George R. Hatch dated January 7, 2016

COMMONWEALTH OF MASSACHUSETTS**DEPARTMENT OF CORRECTION
MA ALCOHOL & SUBST ABUSE CTR
INCIDENT REPORT**

Incident Report # : 1448492 **Incident Time :** 00:53 **Date:** 01/06/2016 **Place Occurred:** Parking Lot
Codes & Subject : INMATE RELATED **Code 99**

Reported By : Hatch George R CO III

Department: Corrections

Reported Date: 01/07/2016

Description : On 7 JAN 16 at 0053 a Code 99, medical emergency, was called in the parking lot. An Essex County Deputy Sheriff notified control that there was a civil commit in his van needing immediate medical attention. Staff and medical responded and began treating civil commit Sam Dunn (no commit number, had not been intaked yet).

Prior to this I, Lt. Robert Hatch, had been assigned by DOS Lisa Nordstrom to check with the four county vans to see if any of their passengers were in need of medical attention. At approximately 2250 I checked with the deputies in each of the four vans and was told that no one was in immediate medical distress.

At approximately 2255 I returned to the vans to get a count on the number of commits they each had on board. At this time there was no notification of medical problems.

When I responded to the code in the parking lot, one of the Essex deputies said that Dunn had been talking with them just a few minutes before he had the emergency.

| Person Type | Commit No | Name | Housing Unit |
|--------------------|------------------|------------------|---------------------|
| Staff | | Hatch George R | |
| Staff | | Nordstrom Lisa G | |

Entered By: Hatch George R CO III

Supervisor : Hatch George R CO III **Date:** 01/07/2016

Comments : Reviewed

Shift Commander: Almeida Stephen A **Date:** 01/07/2016

Comments : Transported to outside hospital by Bridgewater Fire, Escorted by Essex County Deputies, Supt. IDO and DDo notified.

| | | | | | | | | |
|---|------------------------------------|---------------------------|--------------------------------|-------------------------------|-----------------------------------|---------------------------|------|---------------------------------------|
| DATE 1/7/2016 | SERVICE / AGENCY BRIDGEWATER FD | | | RUN NO. 16-233 | TRUCK A3 | | | 4002120 |
| NAME Samuel Dunn | | | Crew Members CASEY FLORENCE | Cert. P 976912 | On-Call | Call Received Dispatch | 1:02 | Med. Rec. Mileage Start 0 |
| HOME ADDRESS 2 Administration Road | | | JAMES BEATTY | P 822135 | | Respond | 1:02 | Mileage Scene 2 |
| | | | SEAN PETERS | P 861928 | | On Scene | 1:05 | Mileage Hospital 14 |
| CITY Bridgewater STATE MA ZIP 02324 | | | | | | Leave Scene | 1:20 | Mileage End |
| INCIDENT ADDRESS 2 Administration Road Bridgewater | | | SS # 000-00-0000 | TELEPHONE # (000) 000-0000 | | At Hospital | 1:35 | Total Mileage 12 |
| RESPONSIBLE PARTY / EMPLOYER | | | INSURANCE MEDEX | POLICY NUMBER | | In Quarters | | Dept. Use |
| PR 1 | AGE 29 | D.O.B. [REDACTED] 1986 | Sex M | LOCAL MD | REASON FOR CALL Cardiac Arrest | MUTUAL AID | | Clinical Impression Cardiac Arrest |

ALLERGIES:
 UNK NKA LATEX

MEDICATIONS:
 UNK NONE

HISTORY: ASTHMA CA CARDIA COPD DIABETE Unknown
 HIGH BP PSYCH SEIZURE STROKE / CVA / TIA

CC-DNR
No

arrive on scene to find 29 y/o male pt on the ground outside of MCI masac. Cpr being done by nurses on scene. It is reported that pt was going to be a civil commit for rehab. MASAC was on "lock down" due to a fight earlier in the night so the pt was waiting in the back of an essex county sheriff's van until cleared to enter the facility. Unknown down time.

AED on pt reports no shock advised. Cpr is continue. Skin still warm and dry. Pupils about 4 mm's bilaterally. Our monitor shows asystole. No apparent signs of trauma or acute injury. Pt moved to the stretcher and then to the ambulance.

18 gauge iv established in right external jugular.

7.5 ett established with lip line at 24. =chest rise and fall, good wave form capnography initially at 40, =breath sounds bilaterally. 2 mg narcan iv, 5 rounds of epi 1 mg each 1:10,000 every 5 minutes administered iv.
 cbg 83.

pt care continued en route to morton hospital. Pt remains in asystole. All interventions rechecked. Waveform capnography at 18 upon arrival at morton.

Full report given to MD and staff. Care transferred to hospital staff.

Amendment 1/7/16 at 0700:

The AED being used was on prior to our arrival. No shock was advised. Then immediately switched to BFD cardiac monitor which showed asystole.

Upon our arrival pt was still in upper and lower restraints. Lower restraints were then removed.

Clothing was cut off to expose the pt.

Essex County Sheriff Officer stayed in the back of the ambulance throughout transport and assisted with CPR.

| EYES OPEN | | VERBAL RESP | | MOTOR RESP | | GLASGOW COM | | RESPIRATIONS | | SYSTOLIC BP | | CONV GCS | | REV TRAUMA | |
|-------------------|-----|--------------|----|-------------------|--------|-------------|--------|--------------|-------|-------------|----------|--------------|-------------|------------|--|
| 4 - Spontaneously | | 5 - Oriented | | 6 - Obeys command | | 15 | | - | | - | | 4 - 13 to 15 | | | |
| Time | LOC | Pulse | BP | Resp | Pupils | BS | Skin | SaO2 | CO2 | EMT | Pain | EKG | Def/Car/Pac | Set | |
| 01:05 | U | 0 | | | 0 | 4 mm | PL/W/D | | | CF 12 | | | | | |
| 01:10 | U | 0 | | | 0 | 4 mm | 83 | PL/W/D | 40 | CF 12 | | Asystole | | | |
| 01:20 | U | 0 | | | 0 | | PL/W/D | 20 | CF 12 | | Asystole | | | | |
| 01:30 | U | 0 | | | 0 | | PL/N/D | 18 | CF 12 | | Asystole | | | | |

| | | | | | | | | | | | | |
|---------------|----------|-----|----------|-----------------|---------------------|---------------|------------------|------------------------|-------------------|----------------------|-----|-----------------------------|
| TIME: | C-MED CH | VHF | CELLULAR | HOSPITAL MTN | TRANSPOR NO CARE | EMS Refuse | POV Cancelled | Med-Flight Diverted | Transfer b DOA | to No Pt Other | | |
| COMPI FTFD RY | | | | | ATTENDANT IN CHARGE | | | REPORT RECEIVED RY | | | MFD | CONTROL PHYSICIAN 000186 |

| | | | | |
|---|---|---|---|--------------|
| DATE 1/7/2016 | SERVICE / AGENCY BRIDGEWATER FD | RUN NO. 16-233 | TRUCK A3 | 4002120 |
| Printed | CASEY FLORENCE | CASEY FLORENCE | | |
| Signature  |  |  |  | |
| Dept. Use 12 | | | | |
| I authorize the holder of this medical report to release it to Social Security/Health Care Financing Administration, Health Care Insurance Co, its intermediaries & carriers, if needed for this or related medical claims. Copies of this authorization are to be used in place of the original & I request payment of medical insurance benefits to the party who accepts assignment or myself. I may be held responsible for payment of this claim if payment is denied from the other sources. HIPAA Policy/Procedures also received. | | | | PAT SIG: |
| AmbuPro EMS v11 | | 06.19.2017 8:12 | | OCI Software |